

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0367
Date:	11-1-21
Amount Paid:	\$250.00 10-25-2021
Other:	
Refund:	



INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name: Harold William Keland Trust				Mailing Address: 555 Main St, Suite 500				City/State/Zip: Racine, WI 53403				Telephone: Samie Arnold (715) 699-9222			
Address of Property: xxx S. Lake Owen Dr.				City/State/Zip: Cable, WI 54821								Cell Phone:			
Email: (print clearly) Chad Ockers (612) 390-0170															
Contractor: Sherman Lumber (320)				Contractor Phone: 679-3438				Plumber: None				Plumber Phone:			
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Mike Furtak (715)				Agent Phone: 817-2034				Agent Mailing Address (include City/State/Zip): see below				Written Authorization Required (for Agent) <input checked="" type="checkbox"/>			
PROJECT LOCATION		Legal Description: (Use Tax Statement)		Tax ID# 13999		Recorded Document: (Showing Ownership) 2018R 574598									
NE 1/4, SW 1/4		Gov't Lot		Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #		Block #	
Subdivision:															
Section 27		Township 44		N, Range 7		W		Town of: Drummond		Lot Size		Acreage 40			

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$90,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	None
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Compost Toilet		
				<input checked="" type="checkbox"/> None		

Existing Structure: (if addition, alteration or business is being applied for)	Length: _____	Width: _____	Height: _____
Proposed Construction: (overall dimensions)	Length: 80	Width: 40	Height: 14

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/>	Principal Structure (first structure on property) - garage	( 40 X 80 )	3,200
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( X )	
		with Loft	( X )	
		with a Porch	( X )	
		with (2nd) Porch	( X )	
		with a Deck	( X )	
<input type="checkbox"/> Commercial Use		with (2nd) Deck	( X )	
		with Attached Garage	( X )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	( X )	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	( X )	
	<input type="checkbox"/>	Accessory Building (explain) _____	( X )	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	( X )	
	<input type="checkbox"/>	Special Use: (explain) _____	( X )	
	<input type="checkbox"/>	Conditional Use: (explain) _____	( X )	
	<input type="checkbox"/>	Other: (explain) _____	( X )	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): \_\_\_\_\_  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Mike Furtak (See Note below)  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 15235 McAully Rd, Cable, WI 54821

Date \_\_\_\_\_

Date 10-21-2021

Attach  
Copy of Tax Statement ☒

If you recently purchased the property send your Recorded Deed

Turn Over





In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

- (1) Show Location of:

(2) Show / Indicate:

(3) Show Location of (\*):

(4) Show:

(5) Show:

(6) Show any (\*):

(7) Show any (\*):
- Proposed Construction

North (N) on Plot Plan

(\*) Driveway and (\*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

(\*) Wetlands; or (\*) Slopes over 20%

Fill Out in Ink – NO PENCIL

see attachmet

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
S. Lake Owen Dr, N				
Setback from the Centerline of Platted Road	140 Feet		Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	100 Feet		Setback from the River, Stream, Creek	NA Feet
			Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	100 Feet			
Setback from the South Lot Line	1,100 Feet		Setback from Wetland	NA Feet
Setback from the West Lot Line	1,000+ Feet		20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line ROW	160 Feet		Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	NA Feet		Setback to Well	NA Feet
Setback to Drain Field	NA Feet			
Setback to Privy (Portable, Composting)	NA Feet			

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

**NOTICE(s):** All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
The local Town, Village, City, State or Federal agencies may also require permits.

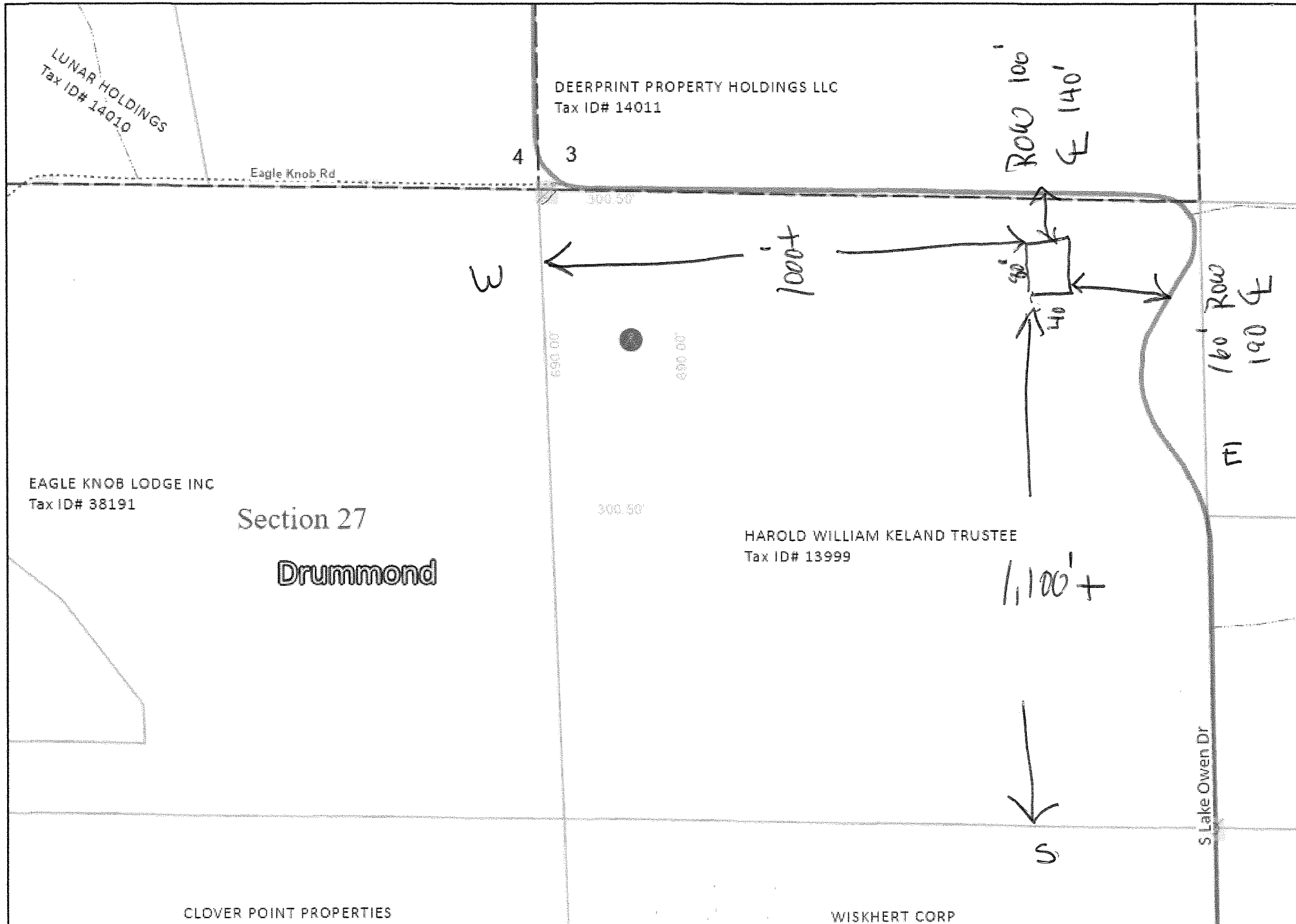
If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

<b>Issuance Information (County Use Only)</b>		Sanitary Number:		# of bedrooms:		Sanitary Date:	
Permit Denied (Date):		Reason for Denial:					
Permit #: 21-0367		Permit Date: 11-1-21					
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s))	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No					
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)					
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:					
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No	
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> No	
Inspection Record:				Zoning District (F1) Lakes Classification (NA)			
Date of Inspection: 10/27/21		Inspected by: [Signature]		Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.) - Build as proposed - Not for Human Habitation or Sleeping - If pressurize water enters structure get septic permit - Work w/ Road authority to place driveway							
Signature of Inspector: [Signature]						Date of Approval: 10/29/21	
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>	

# Bayfield County, WI

N  
↑





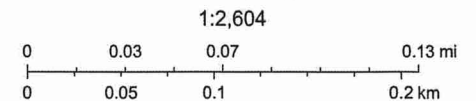
# Bayfield County, WI



10/26/2021, 3:56:05 PM

- Approximate Parcel Boundary
- Private
- Building Footprint 2015
- Building
- Town

150  
165



Bayfield County Land Records Department

***2016 HWK LIFETIME INVESTMENT TRUST***



## 2016 HWK LIFETIME INVESTMENT TRUST

This Declaration of Trust is made this 27th day of July, 2016, by me, H. William Keland, a resident of the State of California.

WHEREAS, it is my intention to create a trust for the benefit of myself and my family, which trust shall be known as the "2016 HWK Lifetime Investment Trust" (hereinafter sometimes referred to as the "Revocable Trust" or the "trust").

NOW, THEREFORE, in consideration of the premises, I, as Grantor, hereby transfer, convey and deliver the sum of \_\_\_\_\_ to myself as Trustee, and do, as Trustee, by the execution of this Declaration of Trust, hereby acknowledge receipt from myself as the Grantor of the transfer of said sum in trust as above described. I, as Grantor and as Trustee, do hereby declare that the trust estate (as defined herein) shall be held by the Trustee in trust for the uses and purposes and subject to all of the terms, covenants, conditions, provisions and stipulations hereof, and the Trustee shall take possession of, manage, control, care for, protect, preserve, administer, invest and reinvest the trust estate of the Revocable Trust according to the best judgment of the Trustee, and shall dispose of the principal thereof and the income therefrom as set forth in this Declaration of Trust.

### ARTICLE 1 IDENTIFICATION OF FAMILY

I am married \_\_\_\_\_;

\_\_\_\_\_). I intend the provisions of this trust instrument (this "Instrument") to apply to all my children, including any born or adopted after the date of this trust instrument. Capitalized terms not defined within the Section in which they are used are defined at Section 11.5.

### ARTICLE 2 DURING MY LIFE

Commencing as of the date of this trust instrument and during my life the Trustee shall administer the Revocable Trust and its net income and principal as follows:

**2.1 My Retained Powers.** I may amend or revoke this trust instrument in whole or in part by signed instruments (other than a Will or Codicil) delivered to the Trustee during my life. The trust property to which any revocation relates shall be conveyed to me or otherwise as I direct. This power is personal to me and may not be exercised by my Legal Representative, attorney in fact, or other.

## **ARTICLE 5 TRUSTEE POWERS**

**5.1 Trustee's General and Specific Powers.** The Trustee, without authorization by the court, may exercise powers conferred by the terms of this trust instrument, and except as limited by the terms of this trust instrument and the fiduciary duties owed by the trustee, all powers over

(k) **Title.** To retain and maintain trust property in any jurisdiction in or outside the United States of America in a land trust or other title-holding trust, in the name of any person or organization as the trustee's nominee, or in any other way without disclosing the trust or agency relationship, and to distinguish between two or more trusts with the same name by any further designation.

(l) **Allocations of Receipts and Disbursements.** To decide how and in what proportions to credit, charge or apportion any receipts or disbursements between principal and income in accordance with applicable law, except that (i) if the trust is a beneficiary or owner of an individual account in any employee benefit plan or individual retirement plan, income earned after death in the account shall be income of the trust, and if the trustee is required to pay all trust income to a beneficiary, the trustee shall collect and pay the income of the account to the beneficiary at least quarterly (and to the extent that all income cannot be collected from the account, the deficiency shall be paid from the principal of the trust), and (ii) reserves for depreciation shall be established out of income only to the extent that the trustee determines that readily marketable assets in the principal of the trust will be insufficient for any renovation, major repair, improvement or replacement of trust property which the trustee deems advisable.

(m) **Division.** To divide or distribute trust property in cash or in kind, or partly in each, and to allocate or distribute undivided interests or different assets or disproportionate interests in assets, and no adjustment shall be made to compensate for a disproportionate allocation of unrealized gain for federal income tax purposes.

(n) **Delegation.** To employ agents, employees, attorneys, accountants, financial and investment advisors, **property managers**, investment counsel, depositories and proxies and to delegate to them without notice to any beneficiary any powers, discretion or duties of the trustee other than distribution discretion, even though the delegated function is not ministerial in nature, including the delegation to investment managers of investment review and selection; to pay reasonable compensation from the trust property for services rendered by those agents, without diminishing any compensation to which the trustee otherwise is entitled; and where qualification for, or preservation of, a federal tax benefit attributable to a trust asset depends on the material participation or other management by one or more individuals, to designate an individual as "Manager" and delegate to that individual for that purpose those fiduciary powers selected by the trustee.

(o) **Nominee.** To cause any property, real or personal, belonging to a trust to be held or registered in the trustee's name or the name of a nominee or in such other form as the trustee deems best without disclosing the trust relationship.

(p) **Separate Trust Terms.** To administer any trust or account created by segregation or severance as follows:

(1) Income earned on a segregated amount, portion or specific assets after the segregation is effective shall pass to the recipient of such amount, portion or specific trust property. In administering the trust property of any separate account or trust and in making



finances and damages brought or imposed by federal, state or local government authorities or by a private litigant; and (iv) employ agents, consultants and legal counsel to assist with or perform the above undertakings or actions; and to abandon or refuse to accept property which has or may have environmental damage or liability.

(v) **General.** To execute and deliver all necessary instruments, including instruments containing covenants and warranties binding upon and creating a charge against the trust property, and give full receipts and discharges; to perform every other act which is authorized or permitted by law and necessary or appropriate for the proper administration of a trust and the management, investment, protection and disposition of trust property.

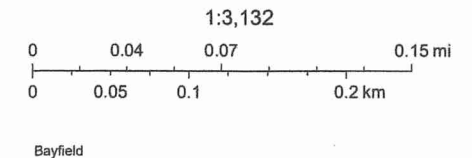
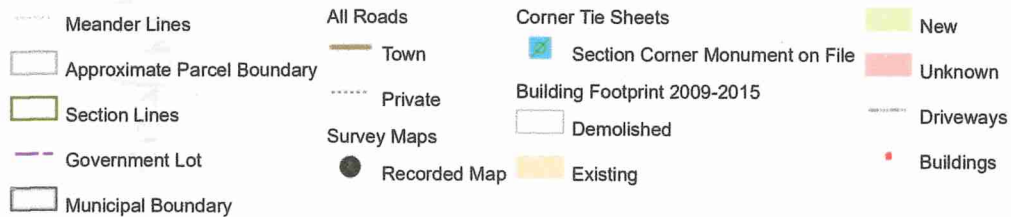
be subject to the same conditions as any other trust investment instrument with the exceptions that



# Bayfield County, WI



10/8/2021, 10:47:24 AM





- authorization ✓
- trust docs ✓
- site plan (Sherman Lumber (612) 390-0170 Chad Oelkers
- bldg plans
- cost estimate \$190,000
- H<sub>2</sub>O } - No
- Living 1/4's - No
- fees \$300 ✓
- LU Ap fee \$250 ✓

# Real Estate Bayfield County Property Listing

Today's Date: 10/10/2021

Property Status: **Current**

Created On: 3/15/2006 1:15:19 PM

## Description Updated: 9/25/2018

**Tax ID:** 13999  
**PIN:** 04-018-2-44-07-27-3 01-000-10000  
**Legacy PIN:** 018103009000  
**Map ID:**  
**Municipality:** (018) TOWN OF DRUMMOND  
**STR:** S27 T44N R07W  
**Description:** NE SW SUBJ TO E IN DOC 2018R-574598  
 231 (2016 HWK LIFETIME INV TRUST  
 DTD 7/27/2016)  
**Recorded Acres:** 40.000  
**Calculated Acres:** 42.265  
**Lottery Claims:** 0  
**First Dollar:** No  
**Zoning:** (F-1) Forestry-1  
**ESN:** 112

## Tax Districts Updated: 3/15/2006

1 STATE  
 04 COUNTY  
 018 TOWN OF DRUMMOND  
 041491 SCHL-DRUMMOND  
 001700 TECHNICAL COLLEGE

## Recorded Documents Updated: 9/25/2018

**QUIT CLAIM DEED**  
 Date Recorded: 9/19/2018 2018R-574598  
**WARRANTY DEED**  
 Date Recorded: 9/19/2018 2018R-574597

## Ownership Updated: 9/25/2018

**HAROLD WILLIAM KELAND TRUSTEE** RACINE WI

**Billing Address:** **Mailing Address:**  
**HAROLD WILLIAM KELAND** **HAROLD WILLIAM KELAND**  
**TRUSTEE** **TRUSTEE**  
 555 MAIN ST 555 MAIN ST  
 STE 500 STE 500  
 RACINE WI 53403 RACINE WI 53403

## Site Address \* indicates Private Road

N/A

## Property Assessment Updated: 9/22/2015

**2021 Assessment Detail**

Code	Acres	Land	Imp.
G6-PRODUCTIVE FOREST	40.000	68,000	0

**2-Year Comparison**

	2020	2021	Change
<b>Land:</b>	68,000	68,000	0.0%
<b>Improved:</b>	0	0	0.0%
<b>Total:</b>	68,000	68,000	0.0%

## Property History

N/A

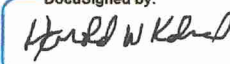
911 - \$75 Em Management / Land Records  
 LUAp - principal structure  
 \$90,000,  
 v \$250 LUAp fee  
 100 ROW, E 140'  
 160 ROW, E 190' RL 210'  
 contractor Sherman Lumber



## Zoning Consulting/Real Estate Services LLC Disclosure

1. I (we) acknowledge that North Star Realtors and John Podlesny, (John Podlesny owner of North Star Realtors), have no interest in Zoning Consulting/Real Estate Services LLC as Zoning Consulting/Real Estate Services LLC and Mike Furtak, owner of Zoning Consulting/Real Estate Services LLC are completely independent of North Star Realtors for this zoning application transaction.
2. Mike Furtak is a licensed Realtor in Wisconsin working as a sales associate for North Star Realtors.
3. I (we) grant permission to Mike Furtak and all vendors whose services are required to obtain the desired zoning permits access to the subject property/properties.
4. I (we) authorize Mike Furtak of Zoning Consulting/Real Estate Services LLC to act as our agent to represent our interests during the application process to obtain the required zoning permit(s).
5. I (we) acknowledge that we are responsible for all costs of services provided by vendors and/or other entities to obtain the required permit(s).
6. I (we) hereby understand that by contracting Mike Furtak and Zoning Consulting/Real Estate Services LLC there is **NO GUARANTEE** the desired permit(s) will be approved by the issuing authorities. Additionally there is no guarantee to the timeframe for the issuance of permits.
7. It is the responsibility of the property owner/contractor/plumber to obtain a Uniform Dwelling Code (UDC) or sanitary permit if required.
8. Mike Furtak and Zoning Consulting /Real Estate Services LLC are only responsible to attempt to gain issuance of the necessary Land Use permit as agreed to. Mike Furtak and Zoning Consulting/Real Estate Services LLC will not act as a general contractor or project manager.

The undersigned parties have read and understand the above terms of this disclosure and agree to abide by all terms.

DocuSigned by:  
  
Signature \_\_\_\_\_  
03F453F0C8D44D5...

Print Name: Harold William Keland

10/20/2021  
Date \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name:

Town, City, Village, State or Federal  
Permits May Also Be Required

LAND USE – **X**  
SANITARY –  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **21-0367** Issued To: **Harold William Keland Trustee**

Location: **NE** ¼ of **SW** ¼ Section **27** Township **44** N. Range **7** W. Town of **Drummond**  
SUBJ TO E IN DOC 2018R-574598 231

Gov't Lot	Lot	Block	Subdivision	CSM#
-----------	-----	-------	-------------	------

## Residential

For: **Accessory Structure: [ 1- Story ]; Garage (80' x 40') = 3,200 sq. ft. ] Height of 14'**

**(Disclaimer):** Any future expansions or development would require additional permitting.

**Condition(s): Build as Proposed. Not for Human Habitation or Sleeping Purposes. If pressurized water enters structure a sanitary permit is required. Work with road authority to place driveway.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

**Tracy Pooler, AZA**

Authorized Issuing Official

**November 1, 2021**

Date



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0369
Date:	11-1-21
Amount Paid:	\$75.00
Other:	10-14-2021 JIG
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name: <u>Erwin R. Jorgenson</u> <u>Beverly J. Dahl</u>				Mailing Address: <u>PO Box 44</u> <u>Drummond, WI 54832</u>				City/State/Zip: <u>54832</u> <u>Drummond, WI</u>				Telephone: <u>Bev</u> <u>(715) 580-0795</u>			
Address of Property: <u>52670 Owen Ave</u>				City/State/Zip: <u>Drummond, WI 54832</u>											
Email: (print clearly)															
Contractor: <u>Wade Spears</u> (715) <u>492-0372</u>				Contractor Phone: <u>492-0372</u>				Plumber: <u>None</u>				Plumber Phone:			
Authorized Agent: (Person Signing Application on behalf of Owner(s)) <u>Mike Fustak</u> (715) <u>817-2034</u>				Agent Phone: <u>817-2034</u>				Agent Mailing Address (include City/State/Zip): <u>6173 Iron Lake Rd, I.R. WI</u>				Written Authorization Required (for Agent)			
PROJECT LOCATION		Legal Description: (Use Tax Statement)				Tax ID# <u>15234</u>				Recorded Document: (Showing Ownership) <u>2020R</u> <u>583191</u>					
<u>SW 1/4, NW 1/4</u>		Gov't Lot		Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #		Block #	
Section <u>33</u> , Township <u>45</u> N, Range <u>7</u> W														Subdivision: <u>Townsite of Drummond</u>	
														Lot Size <u>1.288</u> Acreage	

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$20,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> Municipal/City	<input checked="" type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
					<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: <u>20</u>	Width: <u>16</u>	Height: <u>14</u>

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	( X )	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( X )	
		with Loft	( X )	
		with a Porch	( X )	
		with (2 <sup>nd</sup> ) Porch	( X )	
		with a Deck	( X )	
<input type="checkbox"/> Commercial Use		with (2 <sup>nd</sup> ) Deck	( X )	
		with Attached Garage	( X )	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	( X )	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	( X )	
	<input checked="" type="checkbox"/>	Accessory Building (explain) <u>garage</u>	( 20 X 16 )	320
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	( X )	
	<input type="checkbox"/>	Special Use: (explain) _____	( X )	
	<input type="checkbox"/>	Conditional Use: (explain) _____	( X )	
	<input type="checkbox"/>	Other: (explain) _____	( X )	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): \_\_\_\_\_  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Michael F. Fustak (See Note below)  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit P.O. Box 44, Drummond, WI 54832

Date \_\_\_\_\_

Date 10-13-2021

Attach  
Copy of Tax Statement ✓

If you recently purchased the property send your Recorded Deed

Turn Over



In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

- (1) Show Location of:

(2) Show / Indicate:

(3) Show Location of (\*):

(4) Show:

(5) Show:

(6) Show any (\*):

(7) Show any (\*):
- Proposed Construction

North (N) on Plot Plan

(\*) Driveway and (\*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

(\*) Wetlands; or (\*) Slopes over 20%

Fill Out in Ink – NO PENCIL

See attachment

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	58 Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	30 Feet	Setback from the River, Stream, Creek	NA Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	90 Feet		
Setback from the South Lot Line	18 Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line ROW	30 Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	40 Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	NA Feet	Setback to Well	NA Feet
Setback to Drain Field	NA Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

**NOTICE(s):** All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number:		# of bedrooms:		Sanitary Date:		
Permit Denied (Date):		Reason for Denial:						
Permit #: 21-0349		Permit Date: 11-1-21						
Is Parcel a Sub-Standard Lot		<input checked="" type="checkbox"/> Yes (Deed of Record) 230-926	<input type="checkbox"/> No	Mitigation Required		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership		<input type="checkbox"/> Yes (Fused/Contiguous Lot(s))	<input checked="" type="checkbox"/> No	Mitigation Attached		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No					
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)						
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
Case #:		Case #:						
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	5/9/70	Were Property Lines Represented by Owner		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Inspection Record:						Zoning District R-4		
						Lakes Classification NA		
Date of Inspection: 10/19/21		Inspected by: [Signature]				Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)								
- Build as proposed								
- Not for Human Habitation or sleeping								
- If pressurized water enters structure get septic permits								
Signature of Inspector: [Signature]						Date of Approval: 10/29/21		
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>		



Row (W.P.L.) - 30'  
Owen Ave - 58'

N.P.L. - 40'  
S.P.L. - 20'  
Bayfield County, WI

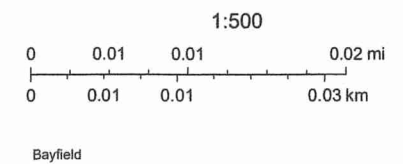
E.P.L. - 70'



10/19/2021, 4:16:22 PM

- Meander Lines
- Approximate Parcel Boundary
- Section Lines
- Municipal Boundary
- All Roads
  - Town
  - Survey Maps
  - UnRecorded Map
- Building Footprint 2009-2015
  - Demolished
  - Existing
  - New
- Driveways
- Buildings

House 28' x 44'



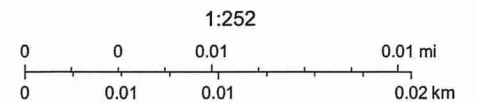


# Bayfield County, WI



10/15/2021, 10:42:11 AM

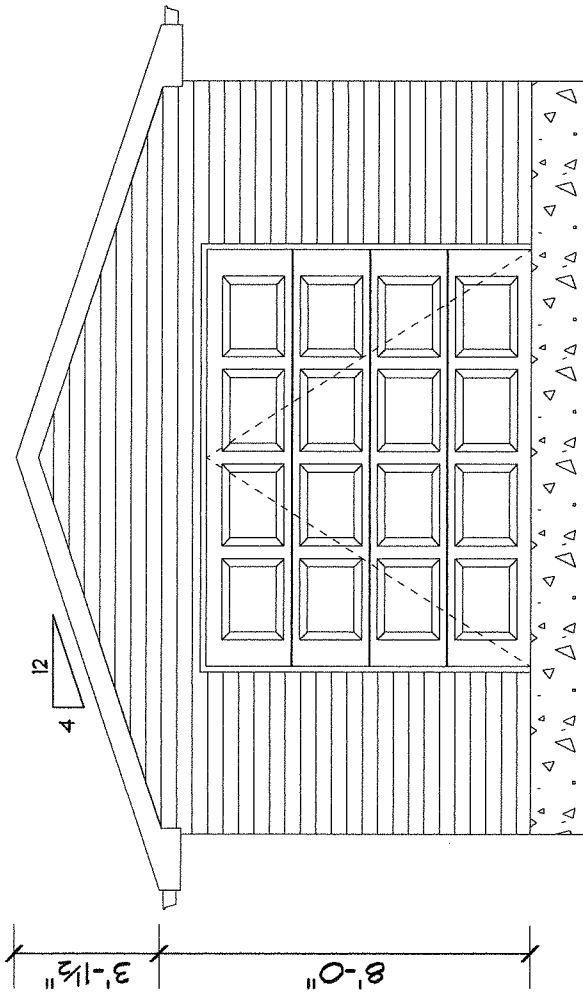
- Approximate Parcel Boundary
- Road Type
- Town
- Building Footprint 2015
- Building



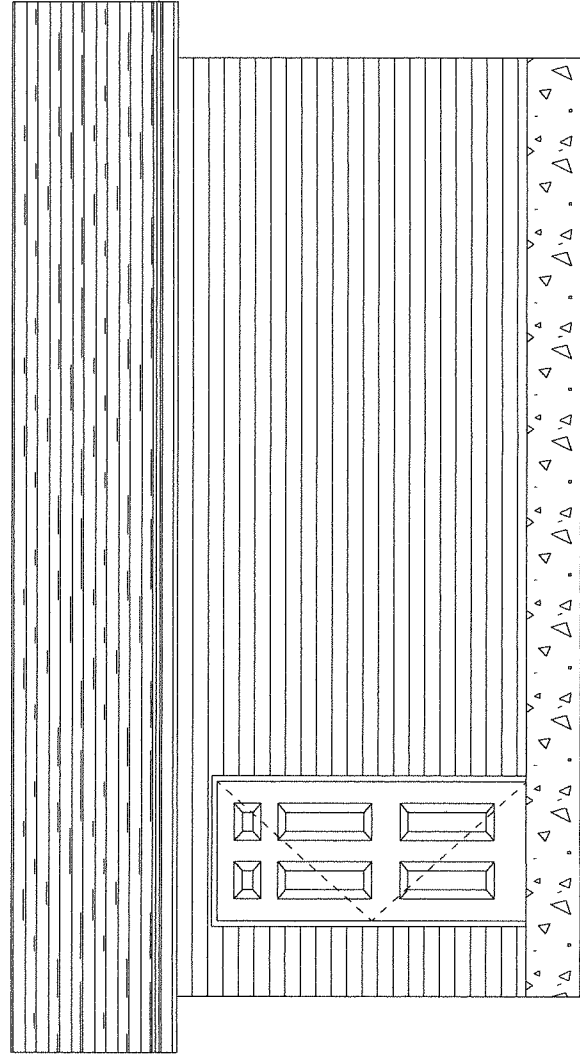
Bayfield County Land Records Department



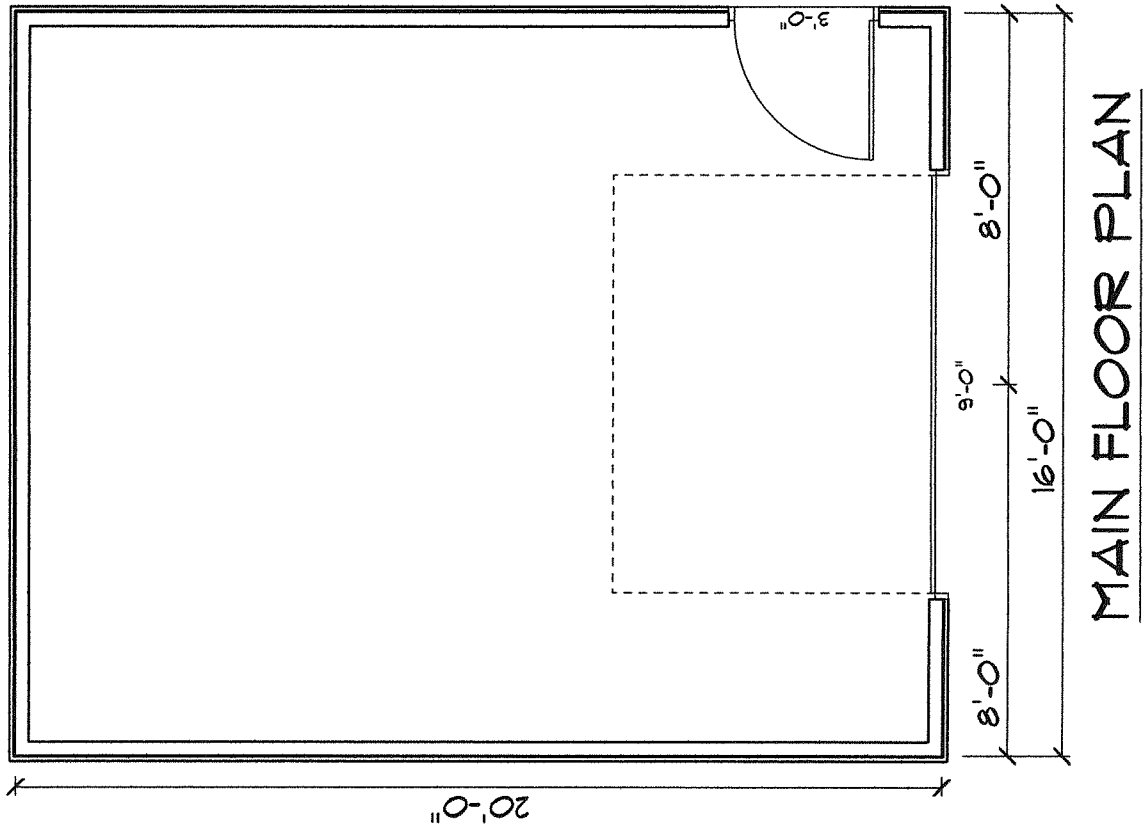
Dahl / Sorensen



FRONT ELEVATION



SIDE ELEVATION



MAIN FLOOR PLAN

# Real Estate Bayfield County Property Listing

Today's Date: 10/19/2021

Property Status: Current

Created On: 3/15/2006 1:15:22 PM

## Description Updated: 8/4/2020

**Tax ID:** 15234  
**PIN:** 04-018-2-45-07-33-2 00-162-78000  
**Legacy PIN:** 018115709000  
**Map ID:**  
**Municipality:** (018) TOWN OF DRUMMOND  
**STR:** S33 T45N R07W  
**Description:** TOWNSITE OF DRUMMOND 2 PARS IN SW NW IN DOC 2020R-583191 644  
**Recorded Acres:** 0.000  
**Calculated Acres:** 0.288  
**Lottery Claims:** 0  
**First Dollar:** No  
**Zoning:** (R-4) Residential-4  
**ESN:** 112

## Tax Districts Updated: 3/15/2006

1	STATE
04	COUNTY
018	TOWN OF DRUMMOND
041491	SCHL-DRUMMOND
001700	TECHNICAL COLLEGE
047050	DRUMMOND SANITARY #1

## Recorded Documents Updated: 3/15/2006

**WARRANTY DEED**  
Date Recorded: 7/17/2020 2020R-583191  
**WARRANTY DEED**  
Date Recorded: 3/26/2019 2019R-576859  
**CONVERSION**  
Date Recorded: 230-326;544-288;716-403

## Ownership Updated: 8/4/2020

**BEVERLY J DAHL** DRUMMOND WI  
**ERWIN R JORGENSEN** DRUMMOND WI

**Billing Address:**  
**DAHL, BEVERLY J & JORGENSEN, ERWIN R**  
PO BOX 44  
DRUMMOND WI 54832

**Mailing Address:**  
**DAHL, BEVERLY J & JORGENSEN, ERWIN R**  
PO BOX 44  
DRUMMOND WI 54832

## Site Address \* indicates Private Road

52670 OWEN AVE DRUMMOND 54832

## Property Assessment Updated: 8/9/2021

### 2021 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	0.288	13,900	0

2-Year Comparison	2020	2021	Change
<b>Land:</b>	11,500	13,900	20.9%
<b>Improved:</b>	14,400	0	0.0%
<b>Total:</b>	25,900	13,900	-46.3%

## Property History

N/A

*NEW MAP  
\*  
GHED Plans/size*





# Real Estate Bayfield County Property Listing

Today's Date: 10/9/2021

Property Status: **Current**

Created On: 3/15/2006 1:15:22 PM

## Description

Updated: 8/4/2020

**Tax ID:** 15234  
**PIN:** 04-018-2-45-07-33-2 00-162-78000  
**Legacy PIN:** 018115709000  
**Map ID:**  
**Municipality:** (018) TOWN OF DRUMMOND  
**STR:** S33 T45N R07W  
**Description:** TOWNSITE OF DRUMMOND 2 PARS IN SW NW IN DOC 2020R-583191 644  
**Recorded Acres:** 0.000  
**Calculated Acres:** 0.288  
**Lottery Claims:** 0  
**First Dollar:** No  
**Zoning:** (R-4) Residential-4  
**ESN:** 112

## Tax Districts

Updated: 3/15/2006

1 STATE  
 04 COUNTY  
 018 TOWN OF DRUMMOND  
 041491 SCHL-DRUMMOND  
 001700 TECHNICAL COLLEGE  
 047050 DRUMMOND SANITARY #1

## Recorded Documents

Updated: 3/15/2006

**WARRANTY DEED**  
 Date Recorded: 7/17/2020 2020R-583191  
**WARRANTY DEED**  
 Date Recorded: 3/26/2019 2019R-576859  
**CONVERSION**  
 Date Recorded: 230-326;544-288;716-403

## Ownership

Updated: 8/4/2020

**BEVERLY J DAHL** DRUMMOND WI  
**ERWIN R JORGENSEN** DRUMMOND WI

### Billing Address:

**DAHL, BEVERLY J & JORGENSEN, ERWIN R**  
 PO BOX 44  
 DRUMMOND WI 54832

### Mailing Address:

**DAHL, BEVERLY J & JORGENSEN, ERWIN R**  
 PO BOX 44  
 DRUMMOND WI 54832



**Site Address** \* indicates Private Road

52670 OWEN AVE DRUMMOND 54832



**Property Assessment**

Updated: 8/9/2021

### 2021 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	0.288	13,900	0

2-Year Comparison	2020	2021	Change
Land:	11,500	13,900	20.9%
Improved:	14,400	0	0.0%
Total:	25,900	13,900	-46.3%



**Property History**

N/A

- authorization ✓  
 - fees me \$250 ✓  
 - LUAP  
 - plan / dimensions 20'x16' ✓  
 - site plan  
 - cost estimate ✓

Bev 715-580-0795  
 20'x16'

Wade Spears

\$20,000 - \$75 Bay Co. Zo. ✓



18' - S.P.L

30' - Row W.P.L

58' E

40' to A.P.L

90' N.P.L

## Zoning Consulting/Real Estate Services LLC Disclosure

1. I (we) acknowledge that North Star Realtors and John Podlesny, (John Podlesny owner of North Star Realtors), have no interest in Zoning Consulting/Real Estate Services LLC as Zoning Consulting/Real Estate Services LLC and Mike Furtak, owner of Zoning Consulting/Real Estate Services LLC are completely independent of North Star Realtors for this zoning application transaction.
2. Mike Furtak is a licensed Realtor in Wisconsin working as a sales associate for North Star Realtors.
3. I (we) grant permission to Mike Furtak and all vendors whose services are required to obtain the desired zoning permits access to the subject property/properties.
4. I (we) authorize Mike Furtak of Zoning Consulting/Real Estate Services LLC to act as our agent to represent our interests during the application process to obtain the required zoning permit(s).
5. I (we) acknowledge that we are responsible for all costs of services provided by vendors and/or other entities to obtain the required permit(s).
6. I (we) hereby understand that by contracting Mike Furtak and Zoning Consulting/Real Estate Services LLC there is **NO GUARANTEE** the desired permit(s) will be approved by the issuing authorities. Additionally there is no guarantee to the timeframe for the issuance of permits.
7. It is the responsibility of the property owner/contractor/plumber to obtain a Uniform Dwelling Code (UDC) or sanitary permit if required.
8. Mike Furtak and Zoning Consulting /Real Estate Services LLC are only responsible to attempt to gain issuance of the necessary Land Use permit as agreed to. Mike Furtak and Zoning Consulting/Real Estate Services LLC will not act as a general contractor or project manager.

The undersigned parties have read and understand the above terms of this disclosure and agree to abide by all terms.

Signature Beverly J. Dahl  
Print Name: Beverly J. Dahl

Date 10/11/2021

Signature Erwin R. Jorgenson  
Print Name: Erwin R. Jorgenson

Date 10/11/2021



Town, City, Village, State or Federal  
Permits May Also Be Required

LAND USE – **X**  
SANITARY –  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **21-0369** Issued To: **Erwin Jorgenson & Beverly Dahl**

**2 Pars in**

Location: **SW**  $\frac{1}{4}$  of **NW**  $\frac{1}{4}$  Section **33** Township **45** N. Range **7** W. Town of **Drummond**

Gov't Lot Lot Block Subdivision **Townsite Site of Drummond** CSM#

**Residential**

For: **Accessory Structure: [ 1- Story ]; Garage (20' x 16') = 320 sq. ft. ] Height of 14'**

**(Disclaimer):** Any future expansions or development would require additional permitting.

**Condition(s): Build as Proposed. Not for Human Habitation or Sleeping Purposes. If pressurized water enters structure a sanitary permit is required.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

**Tracy Pooler, AZA**

Authorized Issuing Official

**November 1, 2021**

Date